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# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	10/560,548
Filing Date	December 12, 2005
First Named Inventor	Daniel Dreyer
Title	Separator Material For Forming A
Art Unit	
Examiner Name	
Attorney Docket Number	534P015

I hereby appoint:



Practitioners associated with the Customer Number:

42754

OR



Practitioner(s) named below:

Name	Registration Number
Kevin S. Lemack	32,579
Robert C. Frame	54,104
Henry C. Nields	17,029

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Nields & Lemack		
Address	176 E. Main Street, Suite 7		
City	Westboro	State	MA
Country	USA		
Telephone	508-898-1818	Fax	508-898-2020

I am the:

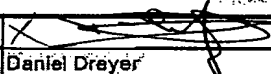


Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

## SIGNATURE of Applicant or Assignee of Record

Signature:		Date	12/13/05
Name:	Daniel Dreyer	Telephone:	
Title and Company:			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



\*Total of \_\_\_\_\_ forms are submitted.

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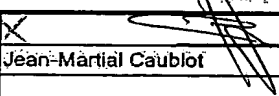
I am the:



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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	13 Jan 06
Name	Jean-Martial Caublot	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below:

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